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** CONTINUING DATA *****

This application is a CIP of 10/628,645 07/28/2003 PAT 6,804,117

OKAY, TM

** FOREIGN APPLICATIONS *****

NO, TM

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/18/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY PA	SHEETS DRAWING 18	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Verified and Acknowledged Examiner's Signature _____ Initials <i>TM</i>			

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TITLE

Flexible loop thermosyphon

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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